

General

Title

Cutaneous melanoma: proportion of patients with cutaneous melanoma undergoing diagnostic excision biopsy who undergo a wide local excision.

Source(s)

NHS Scotland, Scottish Cancer Taskforce. Cutaneous melanoma clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Feb. 32 p. [27 references]

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the proportion of patients with cutaneous melanoma undergoing diagnostic excision biopsy who undergo a wide local excision.

This Cancer Quality Performance Indicator (QPI) measure is separated into two parts. Please refer to the related NQMC summary, [Cutaneous melanoma: proportion of patients with cutaneous melanoma undergoing partial biopsy who undergo a wide local excision](#).

Note from the National Quality Measures Clearinghouse: This measure is part of the QPIs collection. For more information, including a complete list of QPI measure sets, please visit the [Healthcare Improvement Scotland Web site](#) .

Rationale

Surgical excision is an effective cure for primary cutaneous melanoma (Marsden et al., 2010). The lesion is initially removed for histological diagnosis and assessment of tumour depth. A further excision is carried out to minimise the risk of local recurrence (Marsden et al., 2010; Ackerman & Scheiner, 1983).

Studies have shown the importance of removing the tumour and a margin of healthy skin (Faries & Morton, 2007).

The standard treatment for primary cutaneous melanoma is wide local excision of the skin and subcutaneous tissues around the melanoma (Ackerman & Scheiner, 1983; Rubin, 2013). Treatment for melanoma aims to achieve histologically free margins with low likelihood of local recurrence or persistent disease (Kanzler & Mraz-Gernhard, 2001).

The appropriate surgical margin is determined by the thickness of the lesion (Marsden et al., 2010; Ackerman & Scheiner, 1983; Faries & Morton, 2007; Rubin, 2013; Kanzler & Mraz-Gernhard, 2001). Various evidence exists determining the most clinically appropriate surgical margin (Marsden et al., 2010; Ackerman & Scheiner, 1983; Faries & Morton, 2007; Kanzler & Mraz-Gernhard, 2001). The Melanoma Cancer Quality Performance Indicator (QPI) Development Group felt ensuring a wide local excision took place was a good indicator of quality, with the decision of appropriate surgical margin being left to multidisciplinary team (MDT)/clinical judgement.

Evidence for Rationale

Ackerman AB, Scheiner AM. How wide and deep is wide and deep enough? A critique of surgical practice in excisions of primary cutaneous malignant melanoma. *Hum Pathol.* 1983 Sep;14(9):743-4. [PubMed](#)

Faries MB, Morton DL. Surgery and sentinel lymph node biopsy. *Semin Oncol.* 2007 Dec;34(6):498-508. [PubMed](#)

Kanzler MH, Mraz-Gernhard S. Primary cutaneous malignant melanoma and its precursor lesions: diagnostic and therapeutic overview. *J Am Acad Dermatol.* 2001 Aug;45(2):260-76. [115 references] [PubMed](#)

Marsden JR, Newton-Bishop JA, Burrows L, Cook M, Corrie PG, Cox NH, Gore ME, Lorigan P, MacKie R, Nathan P, Peach H, Powell B, Walker C, British Association of Dermatologists Clinical Standards Unit. Revised U.K. guidelines for the management of cutaneous melanoma 2010. *Br J Dermatol.* 2010 Aug;163(2):238-56. [143 references] [PubMed](#)

NHS Scotland, Scottish Cancer Taskforce. Cutaneous melanoma clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Feb. 32 p. [27 references]

Rubin KM. Management of primary cutaneous and metastatic melanoma. *Semin Oncol Nurs.* 2013 Aug;29(3):195-205. [PubMed](#)

Primary Health Components

Cutaneous melanoma; diagnostic excision biopsy; wide local excision

Denominator Description

All patients with cutaneous melanoma undergoing diagnostic excision biopsy (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Number of patients with cutaneous melanoma undergoing diagnostic excision biopsy who undergo a wide local excision (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The collection of data is piloted on a small number of patient records using a paper data collection form produced by the Information Services Division (ISD). The aim is to identify any anomalies or difficulties with data collection prior to full implementation. At least one NHS board in each Regional Cancer Network participates in the pilot.

Evidence for Extent of Measure Testing

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory Procedure/Imaging Center

Hospital Inpatient

Hospital Outpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Unspecified

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Getting Better

Living with Illness

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Diagnostic Evaluation

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All patients with cutaneous melanoma undergoing diagnostic excision biopsy

Exclusions

Patients who died before treatment

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of patients with cutaneous melanoma undergoing diagnostic excision biopsy who undergo a wide local excision

Exclusions

Patients who died before treatment

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Paper medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Prescriptive Standard

Target: 95%

The tolerance within this target accounts for factors of patient choice and for situations in which it is not clinically possible to undertake a wide local excision due to the size and location of the tumour.

Evidence for Prescriptive Standard

NHS Scotland, Scottish Cancer Taskforce. Cutaneous melanoma clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Feb. 32 p. [27 references]

Identifying Information

Original Title

QPI 6 (i) – wide local excisions.

Measure Collection Name

Cancer Quality Performance Indicators (QPIs)

Measure Set Name

Cutaneous Melanoma

Submitter

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Developer

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Funding Source(s)

Scottish Government

Composition of the Group that Developed the Measure

Cutaneous Melanoma QPI Development Group

Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2016 Feb

Measure Maintenance

The Cancer Quality Performance Indicators (QPIs) will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.

Date of Next Anticipated Revision

2017 Dec

Measure Status

This is the current release of the measure.

Measure Availability

Source document available from the [Healthcare Improvement Scotland Web site](#) .

For more information, contact the Healthcare Improvement Scotland at Gyle Square, 1 South Gyle Crescent, Edinburgh, Scotland EH12 9EB; Phone: 0131 623 4300; E-mail: comments.his@nhs.net; Web site: www.healthcareimprovementscotland.org/ .

Companion Documents

The following is available:

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p. This document is available from the [Healthcare Improvement Scotland Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on June 16, 2017.

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Production

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